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UTILITY PATENT APPLICATION TRANSMITTAL		Attorney Docket No. END-887CIP
First Inventor: Kevin D. II et al. Title: SURGICAL STAPLING INSTRUMENT HAVING A SINGLE LOCKOUT MECHANISM FOR PREVENTION OF FIRING		
I hereby certify that this correspondence is being deposited today with the United States Postal Service as Express Mail – Post Office to Addressee in an envelope addressed to: Assistant Commissioner for Patents, Box-Patent Application, Washington, DC 20231.		
Name: <i>Kimberly M. Moses</i> Date: <i>10-15-03</i> Kimberly M. Moses		
(only for new nonprovisional applications under 37 CFR 1.53(b))		Express Mail Label No. EU528711741US
APPLICATION ELEMENTS <i>See MPEP Chapter 600 concerning utility patent application contents.</i>		ADDRESS TO: U.S. Patent and Trademark Office 2011 South Clark Place Customer Window, Mail Stop Patent Applications Alexandria, VA 22313-1450
<p>1. <input checked="" type="checkbox"/> Fee Transmittal Form (e.g., PTO/SB/17) (submit an original and a duplicate for fee processing)</p> <p>2. <input type="checkbox"/> Applicant claims small entity status.</p> <p>3. <input checked="" type="checkbox"/> Specification [Total Pages 48] (Preferred arrangement set forth below) - Descriptive Title of the Invention - Cross Reference to Related Applications - Statement Regarding Fed sponsored R&D - Reference to sequence listing, a table, or a computer program listing appendix - Background of the Invention - Brief Summary of the Invention - Brief Description of the Drawings (if filed) - Detailed Description - Claim(s) - Abstract of the Disclosure</p> <p>4. <input checked="" type="checkbox"/> Drawing(s)(35 USC 113) [Total Sheets 27]</p> <p>5. <input checked="" type="checkbox"/> Oath or Declaration [Total Pages 4] a. <input checked="" type="checkbox"/> Newly Un-executed (original or copy) b. <input type="checkbox"/> Copy from a prior application (37 CFR 1.63(d)) (for continuation/divisional with Box 18 completed) i. <input type="checkbox"/> DELETION OF INVENTOR(S) Signed statement attached deleting inventor(s) named in the prior application, see 37 CFR 1.63(d)(2) and 1.33(b).</p> <p>6. <input type="checkbox"/> Application Data Sheet. See 37 CFR 1.76</p> <p>18. If a CONTINUING APPLICATION, check appropriate box and supply the requisite information below and in a preliminary amendment, or in an Application Data Sheet under 37 CFR 1.76: <input type="checkbox"/> Continuation <input type="checkbox"/> Divisional <input checked="" type="checkbox"/> Continuation-in-Part (CIP) of prior application No.: <u>10/441,424</u> filed <u>May 20, 2003</u> Prior application information: Examiner _____ Group Art Unit: 3721</p> <p>For CONTINUATION or DIVISIONAL APPS only: The entire disclosure of the prior application, from which an oath or declaration is supplied under Box 5b, is considered a part of the disclosure of the accompanying continuation or divisional application and is hereby incorporated by reference. The incorporation can only be relied upon when a portion has been inadvertently omitted from the submitted application parts.</p> <p>19. CORRESPONDENCE ADDRESS <input checked="" type="checkbox"/> Customer Number or Bar Code Label <u>000027777</u> or <input checked="" type="checkbox"/> Correspondence Address below</p> <p>Name: Philip S. Johnson, Esq. Address: Johnson & Johnson, One Johnson & Johnson Plaza New Brunswick, NJ 08933-7003 USA</p> <p>20. TELEPHONE CONTACT: Dean L. Garner, Esq. Please direct all telephone calls or faxes to: Telephone: (513) 337-8559 Fax: (513) 337-8489</p> <p>21. SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT REQUIRED</p> <p>NAME <u>Dean L. Garner, Esq.</u> Reg. No. 35,877</p> <p><i>Dean L. Garner</i></p> <p>Date: October 15, 2003</p>		U.S.PTO 10/687503 22388

FEE TRANSMITTAL		<i>Complete if Known</i>	
		Application Number	
		Filing Date	Oct ber 15, 2003
		First Named Inventor	K vin Doll et al.
		Group Art Unit	
		Examiner Name	
Attorney Docket Number	END-887CIP		

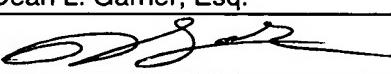
FEE CALCULATION

CLAIMS AS FILED

(1)	(2)	(3)	(4)	(5)
FOR:	NUMBER FILED	NUMBER EXTRA	RATE	BASIC FEE \$ 770.00
TOTAL CLAIMS	20 - 22	2	x 18.00	\$ 36.00
INDEPENDENT CLAIMS	3 - 3	0	x 84.00	\$ 00.00
MULTIPLE DEPENDENT CLAIMS	0 - =	N/A	X 280.00	
			TOTAL FEES	\$806.00

METHOD OF PAYMENT

- Please charge Deposit Account No. 10-0750END-887CIP/DLG in the amount of \$806.00.
- The Commissioner is hereby authorized to charge any additional fees which may be required in connection with the filing of this communication, or credit any overpayment, to Account No. 10-0750END-887CIP/DLG. **This is form is submitted with one original and two copies.**

SUBMITTED BY:		<i>Complete (if applicable)</i>
Typed or Printed Name	Dean L. Garner, Esq.	Reg. No. 35,877
Signature		Date: October 15, 2003
		Deposit Account No. 10-0750